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TRANSMITTAL FORM  (to be used for all correspondence after initial filing)  Total Number of Pages in This Submission	Application Number  Filing Date  First Named Inventor  Art Unit  Examiner Name  Attorney Docket Number	10/791,149  March 1, 2004  Postrel  370-029	IT WINESS IT VISIONAS A VAINO ONIA CONTROL HUMBER.
	CLOSURES (Check all	that apply)	
Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application  Reply to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence A Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Landscape Table on CD  irks	ddress	After Allowance Communication to TC  Appeal Communication to Board of Appeals and Interferences  Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter  Other Enclosure(s) (please Identify below):
	OF APPLICANT, ATTO	RNEY, OR AG	SENT
Firm Name  Anthony R. Barkume, P.C.  Signature  Printed name  Anthony R. Barkume	,		
Date November 4, 2005	F	Reg. No. 33,83	1
I hereby certify that this correspondence is being facs sufficient postage as first class mail in an envelope act the date shown below:  Signature  Anthony R. Barkume	Idressed to: Commissioner for	O or deposited wit	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

TRA		FINFORMATION DIS nder 37 CFR 1.97(b) or	•	ATEMENT	Docket 370-0	
In Re	Application Of: F	1	VOV 0 7 2005			
	Serial No. 10/791,149		TRADEMARK OFFE	Examiner	Group	p Art Unit
Title: BASEI		SYSTEM FOR ISSUING, A	AGGREGATING	AND REDEEMIN	G POINTS	
			Address to: at Commissioner for ashington, D.C. 202			
			37 CFR 1.97(b)			
1. 🛛	1.   The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application; within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; or before the mailing date of a first Office Action on the merits, whichever event occurs last.					
			37 CFR 1.97(c)			
2. 🔲	of a national apprinternational app	Disclosure Statement sub plication, or the date of en plication; or after the mail before the mailing date of	try of the nationa ing date of a fir	al stage as set fort	h in 37 CFR 1.491	1 in an
	1. 8	a Final Action under 37 CF	R 1.113, or			
	2. 8	a Notice of Allowance unde	er 37 CFR 1.311,			
	whicheve	er occurs first.				
	Also submitted h	erewith is:				
	☐ a certificat	ion as specified in 37 CFR	1.97(e);			
		OR				
	<del>-</del>	et forth in 37 CFR 1.17(p) CFR 1.97(c).	for submission	of an Information	Disclosure Staten	nent

	SURE STATEMENT (c))	Docket No. 370-029	
In Re Application Of: P	ostrel		
Serial No. 10/791,149	Filing Date March 1, 2004	Examiner	Group Art Unit
Title: METHOD AND S BASED ON MERCHANT	SYSTEM FOR ISSUING, AGGR TTRANSACTIONS	EGATING AND REDEEMING P	OINTS
as described belo  Charge th Credit any Charge a  Certificate of  I certify that this deposit account is bein States Patent and Trade on (Date)  *This certificate may deposit account.	(Only complete if Applicant elects to count of is attainmissioner is hereby authorized w. A duplicate copy of this sheet amount of yoverpayment.  In additional fee required.  Fransmission by Facsimile*  ocument and authorization to charge and facsimile transmitted to the United	to charge and credit Deposit Ace t is enclosed.  Certificate of Mailing  Certify that this document a	by First Class Mail  Ind fee is being deposited in the U.S. Postal Service as 1.8 and is addressed to the Patents, Washington, D.C.
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Substitute for form 1449/PTO

Sheet 1

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

of \_ 1

Application Number	10/791,149		
Filing Date	March 1, 2004		
First Named Inventor	Postrel		
Art Unit			
Examiner Name			
Attorney Docket Number	370-029		

Complete if Known

U. S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number  Number-Kind Code <sup>2 (f known)</sup>	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		<sup>US-</sup> 2003/0236704A1	12/25/2003	Antonucci	
		US-			
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		US-			

FOREIGN PATENT DOCUMENTS						
Examiner Cite I	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages		
		Country Code <sup>3</sup> "Number <sup>4</sup> "Kind Code <sup>5</sup> (if known)	MM-DD-YYYY		Or Relevant Figures Appear	Τ°
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Signature Consid	red

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